



Patient Name: \_\_\_\_\_

Patient Phone: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Next MD Visit: \_\_\_\_\_

**REQUEST FOR PHYSICAL THERAPY**

**EVALUATE AND TREAT AS APPROPRIATE**

Treatment Frequency (*days per week*): \_\_\_\_\_

Treatment Duration (*# of weeks*): \_\_\_\_\_

Precautions/Contraindications:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Comments/Special Orders:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SPECIALIZED PROGRAMS**

- Aquatic Therapy
- ASTYM™ Treatment
- Dizziness & Balance
- Ergonomic Assessment
- Low Back Pain Revolution
- Lymphedema
- Pelvic Health & Incontinence
- Physical/Work Capacity Evaluation
- Postural Education
- Sports Performance
- TMD/TMJ
- Women's Health

*In making this referral, physician certifies that prescribed rehabilitation is medically necessary.*

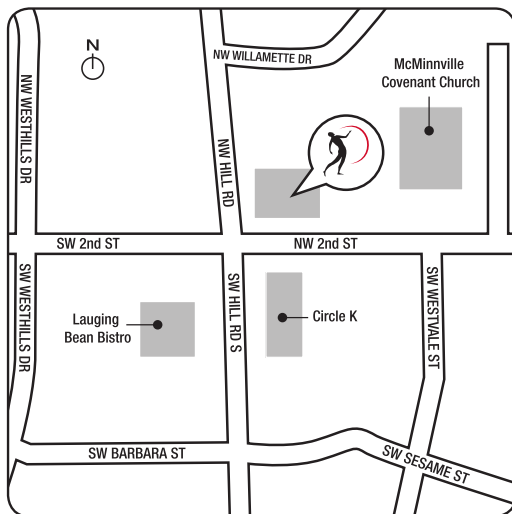
Physician Signature: \_\_\_\_\_

Physician Name: \_\_\_\_\_

Physician Phone: \_\_\_\_\_ Date: \_\_\_\_\_

**(REQUIRED BY MEDICARE)**

**CLINIC LOCATION & PATIENT INSTRUCTIONS ON BACK**



## ABILITY PHYSICAL THERAPY

**Emily Wood** PT, DPT, OCS, CMPT | *Clinic Director*

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**TEL:** 503-434-9594

**FAX:** 503-434-6808

**EMAIL:** [ability@taipt.com](mailto:ability@taipt.com)

*Extended weekday hours and open on Saturdays for your convenience.*

*Check our website for current clinic hours.*

## PATIENT INSTRUCTIONS

### CALL TO SCHEDULE APPOINTMENT

Please contact your preferred location to schedule your physical therapy appointment.

**Date:** \_\_\_\_\_

**Time:** \_\_\_\_\_

**\*\*Please arrive 15 minutes early\*\*  
to complete all new patient  
paperwork.**

### NEW PATIENT FORMS

Our new patient registration forms are now available online. These forms can be printed off and completed prior to arriving to your first visit.

[www.therapeuticassociates.com](http://www.therapeuticassociates.com)

#### Steps from homepage:

Start Your Recovery → For Our Patients  
→ Patient Forms

#### PLEASE NOTE WHEN PRINTING:

**Do not minimize screen and no  
"Fit to Page" or "Page Scaling"**

### INSURANCE/BILLING

We are preferred providers for **most** insurance plans, however plan eligibility may vary. As a courtesy to you, we are happy to verify physical therapy benefits prior to scheduling your first visit.

Co-payments are due at the time of your visit. Our Central Billing Office will bill you for any co-insurance or deductible amount after your insurance has processed claims.

For billing questions, please contact:  
**800-219-8835 (option #5)**

